have proved to be considerable incentives as far as our exporting community is concerned. Besides these schemes, the Central Government has now been encouraging States to set up Special Economic Zones as far as the States are concerned. These Special Economic Zones become deemed foreign territories where there are a large number of fiscal concessions which are given in these areas, in these Zones, as a result of which exporting from these Zones to various parts of the world becomes increasingly competitive. As far as agriculture is concerned, there are the Agriculture Export Zones (AEZs) which are also being encouraged and a very large number of them in the last two years have already come up in many parts of the country.

*370. [The questioner (Shri P.K. Maheshwari) was absent. For answer *vide* page 49 *infra*.]

*371. [The questioner (Shri Harish Rawat) was absent. For answer *vide* page 49-50 *infra*.]

*372. [The questioners (Dr. A.R. Kidwai and Dr. T. Subbarami Reddy) were absent. For answer *vide* page 51 *infra*.]

Nutritional standard

*373. SHRI C. RAMACHANDRAIAH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether it is a fact that National Institute of Nutrition has conducted a survey to assess the nutritional standards of various States;

(b) whether it is also a fact that the National Nutrition Monitoring Bureau (NNMB) has undertaken a survey to study the nutritional levels in the drought affected States;

(c) if so, the findings thereof with special reference to Andhra Pradesh;

(d) the impact of Food for Work and Targeted Public Distribution System (TPDS) on the nutritional levels among the poor in Andhra Pradesh; and

(e) the steps taken to correct the nutritional imbalance among the poor sections?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI R. RAJA): (a) to (e) A Statement is laid on the Table of the House.

Statement

(a) to (e) The Indian council of Medical Research's National Nutrition Monitoring Bureau (with the Central Reference Laboratory at the National Institute of Nutrition at Hyderabad) has undertaken a survey during May-July, 2003 to assess the diet and nutritional status of population in the drought affected areas of the nine States, namely, Andhra Pradesh, Tamil Nadu, Karnataka, Maharashtra, Madhya Pradesh, Orissa, Gujarat, Rajasthan and Chhattisgarh. Based on preliminary findings, it has been reported that there have been no starvation deaths in these States. As regards the State of Andhra Pradesh, about 82% of the households were availing one or the other development programmes, such as Sampoorna Grameen Rozgar Yojana, Targeted Public Distribution System (TPDS), Antodaya Anna Yojana, Annapurna and old age/widow pension programmes.

Regarding the Food for Work and TPDS in the State of Andhra Pradesh, about 41% of the households reportedly participated in Food-for-Work programme, while 64% availed of TPDS. These programmes, alongwith other developmental programmes such as old age/widow/Disabled Pensions, Annapurna, Antodaya Anna Yojana, Integrated Child Development Services (ICDS), Mid-day Meal programmes etc., may have averted more deleterious effects of drought on health and nutritional status of the community.

Several nutrition intervention programmes like, Integrated Child Development Services (ICDS), programme for distribution of vitamin A and Iron folic acid are being implemented. In addition, the programmes such as widow/old age pension, Antodaya Anna Yojana (AAY), Targeted Public Distribution System (TPDS) and Food-for-Work Programme which are being implemented are targeted towards the poor to improve their nutritional status.

SHRI C. RAMACHANDRAIAH: Sir, I wish to bring to the notice of the Government that malnutrition is not just confined to drought years, but it is more a result of general poverty and lack of affordability. Sir, malnutrition is more in the age group of 1—11 years, that is what the private surveys have indicated. Sir, what I am trying to know is whether Government have any document or any survey which evidences the fact that Mid-day Meal scheme, which is being implemented in States like Andhra Pradesh and Tamil Nadu—now it is being introduced in Karnataka also—for school-

going children, will help boost the nutritional levels. If so, is the Government contemplating to provide any incentives to such State Governments, which are implementing Mid-day Meal scheme, so that the level of malnutrition could be reduced?

SHRI A. RAJA: Sir, it is true, as the hon. Member has submitted, that malnutrition is multi-dimensional and inter-generational in nature, and as such, it is, *inter-alia*, connected with lack of adequate nutrition, food security, sanitation and safe drinking water, health and family welfare and poverty alleviation. So, all these factors have to be looked into cumulatively, then only, we can solve the malnutrition problem. Government has undertaken many measures to solve this problem. The National Plan for Action on Nutrition, that has been proposed is being mooted in which 14 Ministries, including the Health Ministry, H.R.D. Ministry, Rural Development Ministry, and other Ministries are involved to evolve this National Plan. Till then, many Ministries, including Health and Family Welfare and Department of Women and Child Development in the Ministry of H.R.D. are taking many measures.

After these measures, as the Hon. Member put it, one of the very vital schemes being sponsored by the Government is Mid-day Meal scheme or noon meal scheme. Apart from this, to solve this malnutrition problem, National Iodine Deficiency Disorder Programme is being carried out in the Ministry of Health and Family Welfare for which we are spending Rs. 30 crores a year. Another major programme available in the Health Ministry is Reproductive Child Health Programme in the Ministry of Health and Family Welfare, for which we are giving Rs. 850 crores per year. Out of these Rs. 850 crores, we are giving some component to address this problem of nutrition to give Vitamin A to solve the problem of Anemia and give more attention for iodine deficiency and other things. As he put it, the Mid-day Meal scheme is a very good scheme, which is being carried out by the Government. I do not think that any State Government, so far, has come forward with any new proposal for getting more incentives so that they can fulfil their aspirations. If such a proposal is received, then we can look into it.

SHRI C. RAMACHANDRAIAH: Sir, I am thankful to the Minister. Immediately, we will send a proposal. Sir, my second supplementary is whether malnutrition is more among the urban poor as compared to the rural poor. Has any study been conducted in this regard? If so, what are

the reasons for such imbalance and what are the efforts being contemplated on the part of the Government to specially focus on the eradication of malnutrition among the urban poor? I have asked this because Food-for-Work programmes are being implemented only in rural areas. If such is the case, it becomes difficult for the State Governments to bring this balance.

SHRI A. RAJA: Sir, the National Institute of Nutrition has conducted a survey from the side of the Government and, on par with this, many NGOs, like Swami Nathan Foundation and other organisations, have conducted surveys. But, after all these surveys, I can submit before the House that there is no disparity between the urban and the rural poor. No nutrition survey has been specifically conducted for the urban poor or the rural poor.

As I said it earlier, apart from the problem of nutrition, it also involves sanitation, drinking water, health, food safety, adequate grains and other things including, sometimes, the disparity in distribution. That is why, we are having our own Public Distribution System (PDS). All these criteria have been looked into at once without any discrimination between the urban areas and rural areas.

SHRIMATI SHABANA AZMI: Mr. Chairman, Sir, my question is specifically with regard to the Mid-day Meal Scheme. In spite of the judgement of the Supreme Court, that they should provide cooked food, several States continue to ignore this. After I mentioned this in my Special Mention, I got a letter from the Human Resource Development Minister saying that it would not be possible to increase the allocation. The States say that they cannot implement this programme, because they do not have financial allocations. The Centre says, "we do not have any money for this purpose". And, the malnutrition levels persist at alarming rates in India.

Sir, also in States like Rajasthan, for instance, the food that they are preparing for the children is a kind of gruel that it takes almost two hours to cook. Now, anything that takes two hours to cook cannot provide any nutrition level at all. Sir, the Mid-day Meal scheme is important because it is supposed to provide nutrition, forget about what it does to quality education. Prof. Amartya Sen is constantly talking about this as a very important scheme. The States which are claiming that they do not have money should be given some further allocation. What is the Centre doing in this regard because what we aim to achieve is a very important goal?

SHRI A. RAJA: Sir, the survey, as I mentioned earlier, reveals that there are no starvation deaths in many of the States. In all the States, all the households or all the families, living Below the Poverty Line, are either availing of the Food-for-Work Programme or availing of the PDS facility.

SHRIMATI SHABANA AZMI: Sir, this has nothing to do with the question.

SHRI A. RAJA: Sir, we are having four or five systems or mechanisms to help the poor people, those who are Below the Poverty Line, to meet the nutrition level.

MR. CHAIRMAN: The question is quite different.

SHRI A. RAJA: Sir, I am coming to that. My submission is that the survey reveals that all the households are either availing of Food-for-Work Programme or availing of the PDS facility.

MR. CHAIRMAN: Mid-day Meal scheme?

SHRIMATI SHABANA AZMI: Sir, I want to know about the Mid-day Meal scheme.

SHRI A. RAJA: Therefore, Sir, when they are availing of both these schemes, the Mid-day Meal Scheme is not at all a problem for any State, and, as such, no report has come to the Government, either to the Ministry of HRD or to the Ministry of Health. Sir, I can say before the House - though it is not within the exclusive purview of my Ministry - that I will forward any representation coming from any State to the HRD Minister or consult the concerned Minister.

SHRI EKANATH K. THAKUR: Sir, a review of the Mid-day Meal scheme must take place. It is being implemented in my State. Poisonous food has been given. The Mid-day Meal scheme must be reviewed thoroughly.

SHRI A. RAJA: Sir, I think it will be appropriate to put a separate question to the concerned Minister. I may not be competent to answer all these questions.

DR. ALLADI P. RAJKUMAR: Sir, it been written to the Chief Ministers of all the States that certain funds are being allocated for Mid-day Meal Scheme. The Minister could kindly let us know whether he has written to all the State Chief Ministers.

SHRI A. RAJA: Sir, that has not come to me ...(*Interruptions*)...

श्री सभापति: चलिए छोड़िए। Next question.

रोगियों के उपचार हेतु वीडियो कांफ्रेंसिंग का उपयोग

*374. **श्रीमती सविता शारदा:** क्या **स्वास्थ्य और परिवार कल्याण** मंत्री यह बताने की कृपा करेंगे कि:

(क) क्या अखिल भारतीय आयुर्विज्ञान संस्थान ने सुदूर इलाकों के मरीजों और डाक्टरों हेतु वीडियो कांफ्रेंसिंग के माध्यम से परामर्श सेवाएं आरंभ की हैं;

(ख) यदि हां, तो तत्संबंधी ब्यौरा क्या है; और

(ग) आरंभ में कौन-कौन से चिकित्सा महाविद्यालयों को जोड़े जाने की योजना है?

स्वास्थ्य और परिवार कल्याण मंत्रालय में राज्य मंत्री (श्री ए॰ राजा): (क) से (ग) एक विवरण सदन के पटल पर रख दिया गया है।

विवरण

(क) जी, हां।

(ख) और (ग) अखिल भारतीय आयुर्विज्ञान संस्थान ने निम्नलिखित स्थानों पर रोगियों के लिए टेली-मेडिसिन परामर्श की शुरूआत की है:-

* एस.एन.एम. अस्पताल, लेह

* जी.एम.सी.एच., जम्मू

* जिला अस्पताल, कठुआ, जम्मू

* गुवाहाटी मेडिकल कालेज और अस्पताल, गुवाहाटी

* संजय गांधी स्नातकोत्तर संस्थान, लखनऊ

* स्नातकोत्तर चिकित्सा शिक्षा एवं अनुसंधान संस्थान, चंडीगढ़

* ए.आई.एम.एस. एण्ड आर.सी., कोचीन

उपर्युक्त के अतिरिक्त, भारतीय अंतरिक्ष अनुसंधान संगठन (आई.एस.आर.ओ.) ने एक प्रायोगिक परियोजना शुरु की है जो प्रमुख कस्बों/शहरों में विशिष्टता अस्पतालों और दूरस्थ अस्पतालों के बीच सैटेलाइट कनेक्शन के जरिए टेली-मेडिसिन संबद्धता (कनेक्टिविटी) की